GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 1 of 1 Ser No. 31546

ENGIE

GAS SAFE REGISTER 574561

Enter Company Registration Number

Engineer [redacted]

Gas Saf [redacted]

Engie Office Address
UOS ACCOMMODATION
14 ENGAGE CRESCENT
SHEFFIELD
S10 3EA

Contract Number UOS
Customer Name ENGIE
Site Address ENGAGE VILLAGE
CRESCENT A, SHEFFIELD
Postcode S10 2GG
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

Appliance Details

App	Landlords appliance Yes/No	Service Inspection Repair	Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	CRESCENT A	BOILER	VAILLANT PROCLIMA PRO 65	115902422700	—	RS
2	YES	SERVICE		BOILER	VAILLANT PROCLIMA PRO 65	115902421850	—	RS
3	YES	SERVICE		CALORIFIER	ARISTON CLAS 60 300	141600659	—	RS
4	YES	SERVICE		DHW HEATER	ARISTON CLAS 60 300	141600659	—	RS

General Safety Checks

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	NA	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas Installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas Installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation

Low level free area cm² or ventilation flow rate inlet m³/h	Actual 1,274	Required (Calculated) 0	
High level free area cm² or ventilation flow rate extract m³/h	Actual 1,274	Required (Calculated) 0	
All ventilation grills clear and unobstructed (Yes/No) YES	Fans and/or flue interlocks operating correctly (Yes/No/NA) NA		

Details of any faults	Remedial Action Taken	Comments and calculations
(3) Pump	Replaced Pump.	
(3)(4) Flue Terminals	To engage/Quote	
(4) Poa Cowlings.		

Appliance Checks

Appliance Checks	App 1 or ~~App 1 High~~	App 2 or ~~App 1 Low~~	App 3 or ~~App 2 High~~	App 4 or ~~App 2 Low~~
Flue flow test satisfactory (Yes/No/NA)	YES	YES	YES	YES
Spillage test satisfactory (Yes/No/NA)	YES	YES	YES	YES
Air/Gas switch operating correctly (Yes/No/NA)	NA	NA	NA	NA
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	YES
Burner lock out time (seconds)	58	58	64	65
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES	YES	YES
Heat net input rating data (kW)	65.0	65.0	62.2	62.2

	App 1 or ~~App 1 High~~	App 2 or ~~App 1 Low~~	App 3 or ~~App 2 High~~	App 4 or ~~App 2 Low~~
Gas burner pressure (mbar) or heat input kW/h required	65.0	65.0	62.2	62.2
Gas burner pressure (mbar) or heat input kW/h measured	NA	NA	NA	NA
Gas rating measured (kW/h / NA)	NA	NA	NA	NA
Air/gas ratio control setting (%/NA)	NA	NA	NA	NA
Net flue gas temperature (gross less ambient) (°C)	47	47	41	46
Oxygen (O_2 %)	4.8	5.0	5.2	5.4
Carbon Monoxide (CO)(ppm)	60	50	24	50

	App 1 or ~~App 1 High~~	App 2 or ~~App 1 Low~~	App 3 or ~~App 2 High~~	App 4 or ~~App 2 Low~~
Carbon Dioxide (CO_2) (%)	9.2	9.1	8.8	8.8
Excess Air (%)	29.6	31.1	33.5	35.6
CO/CO_2 Ratio	0.0007	0.0006	0.0003	0.0006
Gross Efficiency (%)	98.9	98.9	100.0	98.9
CO flue dilution (ppm)	NA	NA	NA	NA
Standing pressure (mbar)	20.1	20.1	20.1	20.1
Working pressure (mbar)	18.1	18.1	17.8	17.8
Is appliance safe for use (Yes/No)	YES	YES	YES	YES
Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO			
Test Instrument	ALTON SPM U300			
Test Instrument serial number	U300 JOE 5390			

Worksheet No (if used)	26104053
Checked by (office use)	
Entered on database	YES

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date	15/5/26
Signature	[redacted]

stomer, Yellow - Service Centre, Pink - Site, Green - Engineer